FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076

Expires:

3235-0076 May 31, 2005

Estimated average burden

1271060

hours per response......16.00

MANUALLY SIGNED ORIGINAL

PURSUANT TO REGULATION DO SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

NOTICE OF SALE OF SECURITIES

5N 0 2002

DATE RECEIVED

☐ ULOE

SEC USE ONLY

^^	020		

03038!	589			•	THOMSON
Name of Offering: (check if this is an amendment and name has changed, and indicate change.) Andes Industries, Inc. Senior Subordinated Convertible Note	FIRMCIAL				
Andes Industries, I	nc. Senior Subordinate	ed Convertible Note		·	
Filing Under (Check	k box(es) that apply):	Rule 504	☐ Rule 505	⊠ Rule 506	Section 4(6)
Type of Filing:	New Filing	☐ Amendment			

	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the i	issuer.	
Name of Issuer: (check if this is an amendmen	nt and name has changed, and indicate change.)	
Andes Industries, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1715 West Sunrise Boulevard, Suite B, Gilbert,	Arizona 85233	480-813-0925
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Same		
Brief Description of Business		
Manufacture and sales of products used in the C satellite equipment.	Communications Industry including, but not limited to	o, fiber optic equipment, connectors and
Type of Business Organization:		
□ Corporation □ limited par	rtnership, already formed	ify):
☐ business trust ☐ limited par	rtnership, to be formed	
	Month Year	
Actual or Estimated Date of Incorporation or Orga	anization: 0 6 0 0	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Er	nter two-letter U.S. Postage Service abbreviation for Stat	e: N V

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not

required to respond unless the form displays a currently valid OMB control number A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☑ Promoter ⊠ Beneficial Owner ☑ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Youtsey, Steven Business or Residence Address (Number and Street, City, State, Zip Code) 1715 West Sunrise Boulevard, Suite B, Gilbert, Arizona 85233 ☑ Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) 1715 West Sunrise Boulevard, Suite B, Gilbert, Arizona 85233 Promoter ■ Beneficial Owner Check Box(es) that Apply: Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Goldman Financial, L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code) 1715 West Sunrise Boulevard, Suite B, Gilbert, Arizona 85233 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Beneficial Owner Executive Officer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

Executive Officer Director

Beneficial Owner

Check Box(es) that Apply: Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

General and/or Managing Partner

B. INFORMATION ABOUT OFFERING	, ikus Sasas	
	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Ц	X
2. What is the minimum investment that will be accepted from any individual?	\$6,500	,000
	Yes	No
 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or 		X
similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an		
associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information		
for that broker or dealer only.		
Full Name (Last name first, if individual) None		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	🔲 A	II States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VA] [WA] [WV] [WI] [WY] [PR]	<u> </u>	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	A	Il States
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	🔲 A	Il States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)		
De la Company Company Company Company Company		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	A	Il States
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]		

•	Use blank sheet, or copy and use additional copies of this sheet, as n	eccessary.)	
ÇE)	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	Approximation of the control of the	
•	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 1 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Tuno of Soppists	Aggregate Offering Price	Amount Already Sold
	Type of Security Debt	\$ 6,500,000	\$ 6,500,000
	Equity	\$ 0.300.000	\$ 0,500,000
	Common Preferred	<u>* </u>	<u>v</u>
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$ 0	\$ 0
	Other (Specify)	\$ 0	\$ 0
	Total	\$	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	1	\$ 6,500,000
	Non-accredited Investors	<u>0</u>	\$ 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Question I.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
1 .	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$ 0
	Accounting Fees		\$ 0
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) transaction expenses		\$ 400,000
	Total		\$ 400,000
	b. Enter the difference between the aggregate offering price given in response to Part C - Question expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross p	1 and total roceeds to	\$ 6,100,000

the issuer."

\$ 6,100,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Pay	ments to Officers Directors, and Affiliates		Payments to Others
Salaries and fees	\mathbf{X}	\$0	\boxtimes	\$0
Purchase of real estate	\boxtimes	\$ 0	\boxtimes	\$ 0
Purchase, rental or leasing and installation of machinery and equipment	X	\$0	\boxtimes	\$ 1,975,000
Construction or leasing of plant buildings and facilities	\boxtimes	\$ 0	\boxtimes	\$ 0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	×	\$ 0	⊠	\$ <u> </u>
Repayment of indebtedness	\boxtimes	\$ 118,000	\boxtimes	\$ 132,000
Working capital	\boxtimes	\$ 0	\boxtimes	\$ 3,875,000
Other (specify):				
	X	\$0	X	\$0
Column Totals	X	\$0	\boxtimes	\$0
Total Payments Listed (column totals added)		⊠ \$	6,100,0	000

. D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice if filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Andes Industries, Inc.	11 - 9-8	Nov. 19, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Steven Youtsey	Chief Executive Officer	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	day of the control of	E. STATE SIGNATURE	Å.
1.		oresently subject to any of the disqualification provisions Yes N	√o Vo
		See Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to 239.500) at such times as required by state	to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CF law.	R
3.	The undersigned issuer hereby undertakes t	to furnish to the state administrators, upon written request, information furnished by the issuer to offere	es.
4.		issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering is notice if filed and understands that the issuer claiming the availability of this exemption has the burd seen satisfied.	
	e issuer has read this notification and knows thorized person.	the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly	У
	uer (Print or Type) des Industries, Inc.	Signature Date Normber 19,100	<u> </u>
	me of Signer (Print or Type) Steven Youtsey	Title (Print or Type) Chief Executive Officer	

APPENDIX

1		2	3	3 4					
	to non- investo	d to sell accredited rs in State - Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
·AL	103	110		Investors	Amount	Mirestors	Amount	163	110
AK									
AZ		X	6,500,000	1	6,500,000	0	0		X
AR									
CA									
СО									
СТ									
DE									
DC		*		<u>-</u>					
FL									
GA									
HI									
ID									
IL					-				
IN									
ΙA									
KS		_							
KY									
LA									
ME									
MD									
MA									
MI									
MN									ļ
MS									
МО									
MT									
NE									
NV									
NH									
NJ									
NM							<u> </u>		
NY									

ì		2	3 Type of security		4 Type of investor and					
	to non-	d to sell accredited rs in State - Item 1)	and aggregate offering price offered in state (Part C - Item 1)		amount purchased in State (Part C - Item 2)				(if yes, attach explanation of waiver granted) (Part E - Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NC										
ND									<u> </u>	
ОН										
OK									<u> </u>	
OR									<u> </u>	
PA								_	ļ	
RI									<u> </u>	
SC									<u> </u>	
SD	<u> </u>								<u> </u>	
TN								-		
TX								-	 	
UT VT									 	
VA									+	
WA									 	
WV								+	+	
WI							· · · · · · · · · · · · · · · · · · ·	-	+	
WY								-	+	
PR									+	